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ERPINGHAM RURAL DISTRICT COUNCIL

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ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

1960

Incorporating the



SURVEYOR AND SENIOR PUBLIC HEALTH INSPECTOR'S REPORT.

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ERPINGHAM RURAL DISTRICT COUNCIL

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DISTRICT HEALTH, WORKS & PLANS COMMITTEE.

Chairman - Mr. W.J.Hayden.

Vice-Chairman - Mr. F.W.Syer.

Mr. F.H.Arnott	Mr. G.D.Fisher
Hon. Mrs. P.M.C.Barclay	Miss R.E.Gurney
Mr. S.H.Bartle	Mr. J. Hagen
Mr. C.W.Batt	Mr. E.C.Holland
Revd.R.K.Cheeseright	Mr. J.E.Mottram
Mr. S.J.Clarke.	Mr. H.W.Moulton
Mrs. B.M.Coltart	Major General H.H.Rich
Mrs. E. Deterding	Mr. J.E.Sainty
Mr. B.J.Dixon	Lord Walpole

Mr. C.R.White

(The Committee meets on the Third Tuesday after  
Council Meeting)

PUBLIC HEALTH DEPARTMENT

STAFF

Medical Officer of Health:

Dr. P.G. Holt, M.B.,Ch.B., D.P.H..

Surveyor and Senior Public Health Inspector:

Mr. Gordon L. Evatt, M.I.H.E.,F.F.A.S.,C.R.S.I.,M.A.P.H.I..

Additional Public Health Inspector:

Mr. W.J.S.Pratt, C.S.I.B., M.A.P.H.I..

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ERPINGHAM RURAL DISTRICT COUNCIL

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR

THE YEAR ENDED 31st DECEMBER, 1960.

To The Chairman and Members of the  
Erpingham Rural District Council:

I have the honour to submit my Annual Report of the health of the area for the year 1960. That the area is healthy is shown by the fact that the death rate, when corrected for age and sex of the local population, is below average. The complete absence of food poisoning and the low incidence of dysentery is also noteworthy and the position with regard to notifiable infectious disease can, on the whole, be described as satisfactory. The same cannot be said of trivial virus infections which are prevalent and have a high nuisance value. These infections, which produce such symptoms as diarrhoea and vomiting, sore throats, fevers, etc. are one of the public health problems which still have to be solved, though there is little hope of a solution in the foreseeable future.

The environmental services provided by the Council have continued to be improved. In 1960 the decision was made to provide main water to every parish in the district by going ahead with the Western Region Scheme, the Eastern Region Scheme having been almost completed by the end of the year. Progress was also made with the Sewerage Scheme, Cley and Northrepps being provided with this service. In the housing field a start was made on a major scheme for the modernisation of Council houses which lacked up-to-date amenities this, of course, not being possible until water and sewerage services were provided.

I would like to express my thanks to the Committee for their support, to the officials of the Council for their co-operation and to the staff of the Local Health Office for their invaluable help in the compilation of this report.

Topography.

The Erpingham Rural District lies in North Norfolk, being bounded on the north by the sea and on the east, west and south by the Smallburgh, St. Faith's & Aylsham and Walsingham Districts.

The coast line of some twenty miles extends from Mundesley in the east to Cley in the west. As far as Weybourne it consists of sandy cliffs and beyond it of marshland protected by shingle beaches.

Inland the country is for the most part open with much variety of heath, woodland and land under cultivation and few natural barriers. The climate is bracing and the rainfall low.

General Statistics.

Area in acres	...	...	...	...	...	71,099
Population (Registrar-General's estimate)	...	...	...	...	...	19,820
Number of inhabited dwellings	...	...	...	...	...	6,249
Rateable value (at 1/4/1960)	...	...	...	...	...	£148,819
Sum represented by a Penny Rate...	...	...	...	...	...	£583
No. of Parishes in District	...	...	...	...	...	44





# VITAL STATISTICS.

		<u>M</u>	<u>F</u>	<u>Total</u>
<u>Live Births:</u>	Legitimate	123	128	251
	Illegitimate	<u>9</u>	<u>9</u>	<u>18</u>
		<u>132</u>	<u>137</u>	<u>269</u>

This gives a birth rate of 13.6 per 1,000 of the estimated population (corrected 16.4) compared with a rate of 17.1 for England & Wales. There were twice as many illegitimate births as last year comprising 6.7% of the total.

Still Births: There were 4 male and 1 female still births and this total of 5 gives a rate of 18.2 per 1,000 births; the national figure is 19.7, the lowest ever recorded. There were no illegitimate still births.

Infant Mortality: Deaths of infants under one year of age: -

	<u>M</u>	<u>F</u>	<u>Total</u>
Legitimate	3	1	4
Illegitimate	-	-	-

This gives an infant mortality rate of 14.8 per 1,000 live births compared with the national rate of 21.7. This latter figure is the lowest ever recorded for the tenth consecutive year.

Deaths: The number of deaths and their causes as recorded by the Registrar-General are shown below. They are classified under the 36 headings based in the abbreviated list of the International Statistical Classification of Diseases, Injuries and Causes of Death, 1955.

Tuberculosis, respiratory	...	...	...	...	...	...	...	1
" other	...	...	...	...	...	...	...	-
Syphilitic disease	...	...	...	...	...	...	...	-
Diphtheria	...	...	...	...	...	...	...	-
Whooping Cough	...	...	...	...	...	...	...	-
Meningococcal infections	...	...	...	...	...	...	...	-
Acute poliomyelitis	...	...	...	...	...	...	...	-
Measles	...	...	...	...	...	...	...	-
Other infective and parasitic diseases	...	...	...	...	...	...	...	1
Malignant neoplasm, stomach	...	...	...	...	...	...	...	4
Malignant neoplasm, lung, bronchus	..	...	...	...	...	...	...	11
Malignant neoplasm, breast	...	...	...	...	...	...	...	2
Malignant neoplasm, uterus	...	...	...	...	...	...	...	1
Other malignant & lymphatic neoplasms	.	...	...	...	...	...	...	28
Leukaemia, aleukaemia	...	...	...	...	...	...	...	1
Diabetes	...	...	...	...	...	...	...	1
Vascular lesions of nervous system	...	...	...	...	...	...	...	37
Coronary disease, angina	...	...	...	...	...	...	...	33
Hypertension with heart disease	...	...	...	...	...	...	...	2
Other heart disease	...	...	...	...	...	...	...	49
Other circulatory disease	...	...	...	...	...	...	...	7
Influenza	...	...	...	...	...	...	...	-
Pneumonia	...	...	...	...	...	...	...	10
Bronchitis	...	...	...	...	...	...	...	2
Other diseases of respiratory system	..	...	...	...	...	...	...	-
Ulcer of stomach and duodenum	...	...	...	...	...	...	...	2
Gastritis, enteritis and diarrhoea	...	...	...	...	...	...	...	2
Nephritis and nephrosis	...	...	...	...	...	...	...	5
Hyperplasia of prostate	...	...	...	...	...	...	...	4
Pregnancy, childbirth, abortion	...	...	...	...	...	...	...	-
Congenital malformations	...	...	...	...	...	...	...	1
Other defined and ill-defined diseases	...	...	...	...	...	...	...	24
Motor vehicle accidents	...	...	...	...	...	...	...	2
All other accidents	...	...	...	...	...	...	...	3
Suicide	...	...	...	...	...	...	...	<u>2</u>





# VITAL STATISTICS.(contd.)

The total number of deaths is almost the same as last year (234). Heart disease accounts for nearly 40% of the total, whilst cancer was responsible for just 20%. These proportions are similar to last year and are in accordance with the national trend.

Once again there were no deaths from maternal causes and this fact, combined with the low still birth and infant mortality rates, indicates a satisfactory state of infant and maternal care.

The crude death rate per 1,000 of the estimated population for the last four years is as follows: -

<u>1957.</u>	<u>1958.</u>	<u>1959.</u>	<u>1960.</u>
11.9	12.0	11.8	11.8

The corrected death rate - 9.5. National rate - 11.5.

## INFECTIOUS DISEASE.

Notifications received during the year are tabulated below:

Parish	Measles.	Wh. Cough.	T.B. Pulmonary.	Scarlet Fever.	Puerperal Pyrexia.	Sonne Dysentary.	TOTAL.
Aldborough		1					1
Aylmerton				1			1
Baconsthorpe		3					3
Banningham	1	2				1	4
Beckham West.		4					4
Beeston Regis	5						5
Calthorpe		1					1
Cley			1				1
Colby		1					1
Edgefield	4	1					5
Erpingham				7			7
Felbrigg	1						1
Holt	2	12		1			15
Hunworth		1					1
Ingworth		1		3			4
Matlaske		1					1
Mundesley		19					19
Northrepps	6		3				9
Overstrand	2						2
Plumstead		1					1
Roughton	9						9
Runton. East	16			2			18
" West	4	3	1				8
Sidestrand				1			1
Suffield		3					3
Thorpe Market	2				1		3
Trimingham	1	3					4
Upper Sheringham	1						1
Weybourne					1		1
Wolterton			1				1
	54	57	6	15	2	1	135



# INFECTIOUS DISEASE (contd.)

Disease	Age								TOTAL
	Unknown	Under 1	1 - 2	3 - 4	5 - 9	10 - 14	15 - 24	25 +	
Whooping Cough		1	5	9	25	12	1	4	57
Measles			7	7	34	2	2	2	54
Sonne Dysentery					1				1
Pulmonary T.B.					2		1	3	6
Scarlet Fever					13	2			15
Puerperal Pyrexia							2		2
		1	12	16	75	16	6	9	135

The total of 135 is considerably lower than the 330 recorded for 1959 but this difference is represented by the incidence of measles. The figures for the last four years are these: -

<u>1957.</u>	<u>1958.</u>	<u>1959.</u>	<u>1960.</u>
174	23	253	54

No cases of food poisoning were notified and only one case of dysentery occurred. The absence of poliomyelitis was most gratifying.

## Tuberculosis.

The number of cases reported during the year is an average for the last two years: -

1958	-	10
1959	-	2
1960	-	6

In addition to these 6 notified cases there were 7 inward transfers, i.e. known cases of tuberculosis who have come to live in the district, so that the total number of cases on the Tuberculosis Register at the end of the year stood at 118 as follows: -

	Pulmonary		Non-Pulmonary.		TOTAL
	Male	Female	Male	Female	
New cases	3	3			6
Inward transfers	3	3		1	7
No. of cases on Register at 31.12.60	55	45	6	12	118



# Poliomyelitis.

The district has been fortunate in that no serious outbreak of poliomyelitis has occurred. It does not follow, however, that this good record will be continued and it is vitally important that a high level of immunity be maintained in the local population. Poliomyelitis used to be called "infantile paralysis" because it attacked young children only, but in recent years its characteristics have altered and now older children and young adults are particularly liable to be victims of the disease. The number of children who have been immunised against the disease is quite high but the position amongst young adults is not nearly so satisfactory. It would appear that we care more for our children than for ourselves, which is very noble of us, but also rather foolish.

The number of persons vaccinated against the disease during 1960 are as shown below: -

Age	Received two injections.	Received third injection.	TOTAL.
Under 1 year	20	-	20
1 year	204	102	306
2 years	33	157	190
3 "	5	34	39
4 "	7	30	37
5 "	11	23	34
6 "	10	28	38
7 "	13	23	36
8 "	9	29	38
9 "	10	26	36
10 "	13	23	36
11 "	8	19	27
12 "	11	33	44
13 "	5	17	22
14 "	8	34	42
15 - 25 years	90	862	952
26 - 40 "	291	149	440
Others	78	49	127
	826	1,638	2464

The total number of persons in Area No.2. who had received three injections at any time up to 31st December, 1960 was as follows: -

Children born 1956 - 60	...	...	...	845
" " 1943 - 55	...	...	...	3,259
Persons " 1933 - 42	...	...	...	1,139
" " before 1933 and				
under 40 years of age	...	...	...	313
Others	...	...	...	85
				<u>5,641</u>

These figures relate to the Administrative Area No.2. of Norfolk County Council as separate figures for Erpingham are not available.





### Diphtheria, Whooping Cough and Tetanus.

Immunisation against diphtheria is now usually combined with that against whooping cough and tetanus so as to reduce the total number of injections required. These injections are best given early in infancy so as to protect against whooping cough which is so dangerous when contracted by a baby. It does not necessarily prevent a child from developing the disease altogether but it does considerably reduce the severity of the illness, so much so that in many cases whooping cough is never suspected or diagnosed.

It is most gratifying to record a substantial increase in the numbers immunised from 252 in 1959 to 456 in 1960. Diphtheria is only kept at bay by maintaining a high level of immunity in the local population and if that falls below a certain level, outbreaks of the disease are likely to occur. This has happened in one or two places recently and is a tragedy which should not occur when prevention is so easy.

The increase in the number of those who have received a booster injection from 11 to 383 reflects the beginning of a campaign to bring up to date all the immunised state of the school children in the district and to combine this with immunisation against tetanus where required.

### Diphtheria Immunisation:

Age at 31/12/60. i.e. born in year -	-1 1960	1 1959	2 1958	3 1957	4 1956	5 1955	6 1954	7 1953	8 1952	9 1951	10 1950	11 1949	12 1948	13 1947	14 1946	Total under 15 years
Total imm. during 1960.	99	206	54	25	17	8	13	9	10	7	4	2	2	-	-	456
-do- Booster	-	-	3	-	18	41	58	59	66	48	55	28	3	3	1	383
Total imm. at any time between 1949 - 60.	99	271	220	272	257	268	292	356	335	232	261	374	349	375	283	4,244
-do- Booster	-	-	3	1	18	42	61	69	76	56	100	159	172	287	277	1,321

The various antigens used were as follows: -

Triple Antigen (Diphtheria/Pertussis/Tetanus)	=	424
Combined Antigen (Diphtheria/Tetanus)	=	31
Single Antigen (Diphtheria only)	=	<u>1</u>
		<u>456</u>

Tetanus Immunisation. A total of 399 children under 15 years of age and 479 persons over the age of 15 years were inoculated during the year with tetanus toxoid and a further 43 received a booster injection. Thus, by including those inoculated with triple or combined antigen, a grand total of 1,376 persons of all ages received protection against tetanus during 1960.





### Smallpox Vaccination.

The following table relates to persons vaccinated in Area No.2. during 1960: -

Age at date of vaccination	Under 1	1	2	3	4	5 - 14	15 & over	Total
Primary	278	9	1	3	2	7	24	324
Re-vaccination	-	2	1	2	3	21	102	131

There is a considerable increase in the numbers vaccinated this year despite the publicity given to the other immunisation procedures. Vaccination against smallpox is still important for 2 reasons. Firstly, it is the only means of protection against this highly infectious and serious disease. Although there is no reservoir of infection in this country cases are occasionally imported from abroad and with the increasing use of fast aircraft the chances of the disease being introduced are greater.

The other reason is bound up with the international regulations requiring a person travelling abroad to have been inoculated in the previous three years. If vaccination had been carried out at an earlier age then the revaccination required would not produce any constitutional disturbance or ill effects, but if primary vaccination is performed on an older child or adult a severe reaction may occur. For this reason it is always strongly advisable for vaccination to be performed in the first 2 or 3 years of life. The procedure may be repeated as often as necessary with impunity.



## GENERAL PROVISIONS OF THE HEALTH SERVICE.

For the purpose of carrying out the services provided by the Norfolk County Council under the National Health Service Act of 1946 the Cromer Urban District, the Sheringham Urban District and the Erpingham Rural District are combined to form County Area No.2. These services include midwifery, the care of mothers and young children, vaccination and immunisation, home nursing, mental health, prevention of illness (care and after-care), home helps and the ambulance service.

Maternity and Child Welfare. The district is served by 11 District Nurse/Midwives many of whom are also qualified Health Visitors. The area between Cromer and Sheringham also enjoys the services of a full time Health Visitor. Infant Welfare Clinics are held at the following places: -

<u>Centre.</u>	<u>Date held.</u>
Banningham - Parish Room.	1st Tuesday in month.
Edgefield - Parish Hall.	Last " " "
Gresham - Assembly Room.	2nd Monday in month.
Mundesley - Church Room.	Last Tuesday in month.
Southrepps - The Rectory.	2nd Wednesday in month.
Northrepps - Church Rooms.	2nd Friday in month.
Roughton - Village Hall.	Last Thursday in month.
Cromer.	1st and 3rd. Thursday in month.
Sheringham.	1st and 3rd. Tuesday in month.
Matlaske.	Last Thursday in month.
Holt.	2nd Tuesday in month.

The Clinics at Cromer and Sheringham are attended by the Medical Officer and those at Matlaske and Mundesley are attended as required.

All children under 5 years of age are visited regularly in their homes by the Health Visitor who takes over from the midwife when the baby is two weeks old. Children of 5 years and over come under the supervision of the School Nurse.

Vaccination and Immunisation. This is carried out by the Assistant County Medical Officer and by the General Practitioners. Sessions for vaccination and immunisation against smallpox, diphtheria, whooping cough, tetanus and poliomyelitis are arranged at Clinics, Schools and General Practitioners' surgeries.

School Medical Service. This takes up a considerable amount of time as every one of the 28 Schools in the area is visited annually and on these occasions a full examination of all children in the appropriate age group is carried out. They are seen during their first year at school, at 10 years of age and before leaving; if any defects are discovered they are referred for treatment or investigation. Children in whom there is thought to be a need for supervision are seen every year. Apart from the routine visits, many special visits to Schools are made for such purpose as immunisation, mental ascertainment, examination when transport to School is believed necessary, and so on. The vision of all pupils is tested at 8 years of age as a routine.

General Welfare. These services are administered in the district by the Local Welfare Officer who is in attendance and available for interview at: -

<u>Cromer:</u>	Local Health Office. 9 - 10 a.m. daily.
<u>Sheringham:</u>	Sheringham U.D.C. Offices. 2 - 2.30 p.m. Tuesday.
<u>Holt:</u>	Shirehall, Tower Street. 11 a.m.- 12 noon Friday.



## ENVIRONMENTAL HEALTH.

It is gratifying to note that no cases of food poisoning occurred during the year. At the same time one should never be complacent on the subject of food hygiene as a small error or lack of care on the part of a food handler could easily produce a serious outbreak of food poisoning. Some establishments are excellent in all respects but in general there is a need for a new outlook on this subject, particularly with regard to the individual worker. Managements and supervisory staff tend to tell their assistants what to do without making certain that the instructions are fully understood and carried out. There is also quite often failure on the individual's part to understand the reasons behind the precautions which are necessary.

If every manager or supervisor of premises where food is handled was to ensure that he or she were fully aware of the facts regarding food hygiene and would enthusiastically instruct and educate his or her staff then I believe we would observe a very great improvement in the position. The public could also help by patronising only those premises where a high standard was maintained; good hygiene would then be synonymous with good business.

I have the honour to be,

Your obedient servant,

P. G. HOLT.

M.B., Ch.B., D.P.H..

July, 1961.





## REPORT OF THE SENIOR PUBLIC HEALTH INSPECTOR

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### HOUSING - SLUM CLEARANCE.

The six dwellings at Gimingham were completed.

### HOUSING IMPROVEMENT GRANTS.

(a) Discretionary. 33 applications were approved during 1960 making a total of 186 approved. Of these 34 were completed during the year making a total of 161 completed since the commencement of the scheme.

(b) Standard. 71 applications were approved during 1960 making a total of 88 approved. Of these 33 were completed in 1960 making a total of 35 completed since the commencement of the scheme.

### COUNCIL HOUSE MODERNISATION.

The works at the Weybourne and Mundesley houses were commenced during the year.

### SEWAGE DISPOSAL.

The village schemes at Northrepps and Cley were completed and the works on the Gimingham Scheme commenced.

Works of preparation for village sewerage schemes were in progress during 1960 at Southrepps, Corpusty and Weybourne.

### SEA OUTFALL.

The works of renewal and extension at West Runton and Overstrand were completed and some work to the East Runton outfall commenced.

### SUMMARY OF INSPECTIONS.

Complaints received	...	...	...	...	...	362
Nuisances abated	...	...	...	...	...	247
Notices served	...	...	...	...	...	127
Summonses taken out	...	...	...	...	...	-
Houses disinfected	...	...	...	...	...	14
Overcrowding	...	...	...	...	...	4
Houses connected with the sewer	...	...	...	...	...	141
Houses connected with the water mains...	...	...	...	...	...	285
Improvements to sanitary conveniences...	...	...	...	...	...	67
Samples of water taken for analysis	...	...	...	...	...	18
Houses closed	...	...	...	...	...	1
Food hygiene inspections	...	...	...	...	...	60
Holiday Camp inspections	...	...	...	...	...	70
Ice Cream samples (all Grade I)	...	...	...	...	...	12

### SLAUGHTERHOUSE' APPOINTED DAY ORDER, 1959.

A survey was made and the report submitted to the Minister of Agriculture, Fisheries and Food as required by The Slaughterhouse Report (Appointed Day) Order, 1959.

Out of the five existing premises only three elected to bring their premises up to standard.



CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR PART.

	Cattle ex. cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.	Horses.
Number killed (if known)	82	-	-	233	126	-
Number inspected	59	-	-	173	96	-
All diseases except tuberculosis and cysticerci - whole carcasses condemned	-	-	-	-	-	-
Carcasses of which some part was condemned	12	-	-	-	2	-
% of the number inspected affected with disease other than tuberculosis and cysticerci	23.4	-	-	-	2.08	-
<u>Tuberculosis only:</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcasses of which some part of organ was condemned	-	-	-	-	-	-
% of the number inspected with tuber- culosis	-	-	-	-	-	-
<u>Cysticercosis:</u>						
Carcasses of which some part of organ was condemned	-	-	-	-	-	-
Carcasses submitted to treatment by re- frigeration	-	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-	-

The undermentioned foodstuffs have been condemned as unfit for human consumption during the year, namely: -

Animal carcasses and organs	...	...	...	1½ cwt.s.
Tinned meats	...	...	...	52 lbs.
Tinned fish	...	...	...	2 lbs.
Tinned fruit	...	...	...	57 lbs.
Tinned vegetables	...	...	...	6 lbs.
Tinned soups	...	...	...	-



FACTORIES ACTS, 1937 - 1959.

PART I OF THE ACT.

1. INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors: -

Premises	Number on Register.	Inspec- tions.	Written Notices.	Occupiers prosecut- ed.
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	5	5	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority	62	28	1	-
(iii) Other premises in which Section 7 is enforced by Local Authority (excluding outworkers' premises)	-	-	-	-
	67	33	1	-

2. CASES IN WHICH DEFECTS were found:

Particulars	No. of cases in which defects were found:				No. of cases in which prosecutions were instituted.
	Referred				
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)					
Overcrowding (S.2).....					
Unreasonable temperature (S.3)					
Inadequate ventilation (S.4)					
Ineffective drainage of floors (S.6)					
Sanitary Conveniences (S.7)					
(a) insufficient .....					
(b) Unsuitable or defective.....	1	1		1	
(c) Not separate for sexes .....					
Other offences against the Act (not including offences relating to Outwork) .....					
	1	1		1	

PART VIII OF THE ACT. OUTWORK.  
SECTIONS 110 and 111.

No Outworkers - Nil Return.

GORDON L. EV/TT, M.A.P.H.I., F.F.A.S..

Surveyor, Housing Architect and  
Senior Public Health Inspector.







